

STATE OF CONNECTICUT  
DEPARTMENT OF PUBLIC HEALTH  
BUREAU OF REGULATORY SERVICES

**RECEIVED**

SEP 17 1996

DEPT. OF PUBLIC HEALTH  
LEGAL OFFICE

In Re: Charles Aspinwall, L.P.N.  
License No. 024207  
91 Alwater Street, Unit #33  
Derby, CT 06418

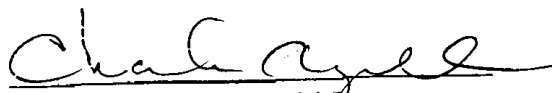
Petition No. 951219-11-042

VOLUNTARY SURRENDER OF LICENSE AFFIDAVIT


Charles Aspinwall, L.P.N., being duly sworn, deposes and says:

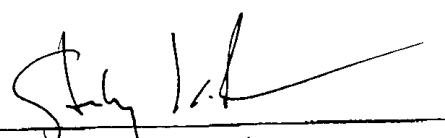
1. I am over the age of majority and understand the obligations of an oath.
2. I make this affidavit on the basis of personal knowledge.
3. I am licensed by the Department of Public Health (hereinafter "the Department") to practice as a licensed practical nurse. I presently hold licensed practical nurse license number 024207.
4. I hereby voluntarily surrender my license to practice as a licensed practical nurse to the Department.
5. I understand and agree that if I seek a new license or to reinstate my license at any time in the future, the allegations contained in the First Amended Statement of Charges dated April 15, 1996, in Petition Number 951219-11-042 shall be deemed true. The allegations in Petition No. 951219-11-042 also include practicing nursing after being suspended by the Board of Examiners for Nursing (hereinafter "the Board"). I further understand that any such application must be made to the Board and the Department. The Board shall be a signatory to any order reinstating my license or granting me a new license.
6. I hereby waive any right to a hearing I may have regarding any request that my license be reinstated or that a new license be issued and also waive any right that I may have to appeal or otherwise challenge the disposition of any such request by the Board.
7. I understand and agree that this affidavit and the case file in Petition Number 951219-11-042 are public documents, and I am executing this affidavit in settlement of the allegations contained in the above-referenced petition.

8. I understand that this affidavit has no effect unless and until it is executed by the Department; and that, upon execution, the Department will present this affidavit to the Board and will move to Withdraw the Statement of Charges in Petition No. 951219-11-042. I understand that this affidavit is not effective unless and until the Board grants the Department's motion or the charges are dismissed.
9. I understand that I have the right to consult with an attorney prior to signing this affidavit.

  
Charles Aspinwall, L.P.N.

Subscribed and sworn to before me this 16 day of September, 1996.

  
~~Notary Public~~ David C. Carmody  
Commissioner of Superior Court

Accepted:   
Stanley K. Peck, Director  
Division of Medical Quality  
Assurance

9/18/96  
Date